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## APPLICANTS

Marco Vicic, Bry S/Marne, FRANCE;  
 Colette Cazeneuve, Paris, FRANCE;  
 Nathalie Mougin, Paris, FRANCE;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/401,027 08/06/2002

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## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

FRANCE 02 08556 07/08/2002

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## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 10/01/2003

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 47	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>K6</i>				

## ADDRESS

22852

## TITLE

Nail varnish

<b>FILING FEE RECEIVED</b> 1366	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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